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Application Number	10/511,408
Filing Date	04/08/2005
First Named Inventor	John Mak
Art Unit	
Examiner Name	
Attorney Docket Number	100325.0198US
	10000000000
	Filing Date First Named Inventor Art Unit Examiner Name

I hereby revoke all previous powers of attorney given in the above-identified application.			
☐ A Power of Attorney is submitted herewith.			
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X I hereby appoint the practitioners associated with the	e Customer Number: 24392		
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I am the: Applicant/Inventor.			
X Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Signature Calos M. Deman			
Name Carlos Hernandez			
Date 10408	Telephone		
NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
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STATEMENT UNDER 37 CFR 3.73(b)		
Applicant/Patent Owner: John Mak		
Application No./Patent No.: 10/511,408 Filed/Issue Date: 8 April 200	95	
Entitled: Configurations and Methods of Acid Gas Removal		
	Corporation n. partnership, university, government agency, etc.)	
states that it is: 1. $\boxed{\chi}$ the assignee of the entire right, title, and interest; or		
The extent (by percentage) of its ownership interest interest interest is		
in the patent application/patent identified above by virtue of either.		
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B. X A chain of title from the inventor(s), of the patent application/patent identified a	bove, to the current assignee as follows:	
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As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 320.09]		
The undersigned whose title is supplied below) is authorized to act on behalf of the a	assignee	
Signature	Date	
Carlos Hernandez Printed or Typed Name	Telephone Number	
Secretary	releptione (valide)	
Title		

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